

Fill in this information to identify your case and this filing:

Debtor 1	<u>Fernando</u>	<u>Anatolio</u>	<u>Soberanis</u>
	First Name	Middle Name	Last Name
Debtor 2	<u>Carlene</u>	<u>Rodrigues</u>	<u>Mascarenhas</u>
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:		<u>Western District of Washington</u>	
Case number	<u>18-14240</u>		

☐ Check if this is an amended filing

## Official Form 106A/B

### Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

- ☐ No. Go to Part 2.  
☒ Yes. Where is the property?

1.1 **Residence**

Street address, if available, or other description

19199 Rainier View Rd SE

Monroe, WA 98272

City State ZIP Code

Snohomish

County

**What is the property?** Check all that apply.

- ☒ Single-family home  
☐ Duplex or multi-unit building  
☐ Condominium or cooperative  
☐ Manufactured or mobile home  
☐ Land  
☐ Investment property  
☐ Timeshare  
☐ Other \_\_\_\_\_

**Who has an interest in the property?** Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

**Other information you wish to add about this item, such as local property identification number:**

Total Value - \$537,000 - Costs of Sale - \$53,700.00 = \$483,300

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?  
\$483,300.00

Current value of the portion you own?  
\$483,300.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Homestead

☒ Check if this is community property (see instructions)

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....



\$483,300.00

Part 2: Describe Your Vehicles

**Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not?** Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

3. **Cars, vans, trucks, tractors, sport utility vehicles, motorcycles**

- ☐ No
- ☒ Yes

3.1 Make:

GMC

Model:

Yukon

Year:

2015

Approximate mileage:

56000

Other information:

**Who has an interest in the property?** Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☒ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

☒ **Check if this is community property** (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

<b>Current value of the entire property?</b>	<b>Current value of the portion you own?</b>
<u>\$35,341.00</u>	<u>\$35,341.00</u>

If you own or have more than one, list here:

3.2 Make:

Kia

Model:

Optima

Year:

2018

Approximate mileage:

10000

Other information:

**Who has an interest in the property?** Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☒ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

☒ **Check if this is community property** (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

<b>Current value of the entire property?</b>	<b>Current value of the portion you own?</b>
<u>\$13,500.00</u>	<u>\$13,500.00</u>

3.3 Make:

Honda

Model:

Accord

Year:

2013

Approximate mileage:

50000

Other information:

**Who has an interest in the property?** Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☒ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

☒ **Check if this is community property** (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

<b>Current value of the entire property?</b>	<b>Current value of the portion you own?</b>
<u>\$9,900.00</u>	<u>\$9,900.00</u>

3.4 Make:

Ford

Model:

Ranger

Year:

2000

Approximate mileage:

196000

Other information:

Who has an interest in the property? Check one.
 

☐ Debtor 1 only
 ☐ Debtor 2 only
 ☒ Debtor 1 and Debtor 2 only
 ☐ At least one of the debtors and another

☒ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?
 

\$1,800.00

Current value of the portion you own?
 

\$1,800.00

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories
 

*Examples:* Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories
 

☒ No
 ☐ Yes

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....
 

→ \$60,541.00

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?  
 Do not deduct secured claims or exemptions.

6. Household goods and furnishings
 

*Examples:* Major appliances, furniture, linens, china, kitchenware
 

☐ No
 ☒ Yes. Describe.....
 

Household Goods and Furnishings

\$3,000.00

7. Electronics
 

*Examples:* Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games
 

☐ No
 ☒ Yes. Describe.....
 

Electronics, including TV, 3 audio systems, and 3 cell phones

\$2,100.00

8. Collectibles of value
 

*Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles
 

☐ No
 ☒ Yes. Describe.....
 

Pictures and paints

\$400.00

9. Equipment for sports and hobbies
 

*Examples:* Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments
 

☐ No
 ☒ Yes. Describe.....
 

Tools

\$300.00

10. Firearms

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

☒ No  
☐ Yes. Describe.....

11. Clothes

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

☐ No  
☒ Yes. Describe.....

Clothing and Wearing Apparel

\$2,000.00

12. Jewelry

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

☐ No  
☒ Yes. Describe.....

3 watches and costume jewelry

\$550.00

13. Non-farm animals

Examples: Dogs, cats, birds, horses

☐ No  
☒ Yes. Describe.....

2 dogs

\$0.00

14. Any other personal and household items you did not already list, including any health aids you did not list

☒ No  
☐ Yes. Describe.....

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here..... →

\$8,350.00

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?  
Do not deduct secured claims or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

☒ No  
☐ Yes..... Cash.....

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

☐ No  
☒ Yes.....

Institution name:

**Examples:** Bond funds, investment accounts with brokerage firms, money market accounts

☒ No  
☐ Yes.....

☒ No  
☐ Yes. Give specific information about them.....

*Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders. *Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them.

☒ No  
☐ Yes. Give specific information about them.....

*Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

☐ No

☒ Yes. List each account separately.

Type of account: Institution name:

401(k) or similar plan: \_\_\_\_\_ **\$150,000.00**

22. **Security deposits and prepayments**

Your share of all unused deposits you have made so that you may continue service or use from a company

*Examples:* Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

☒ No

☐ Yes.....

23. **Annuities** (A contract for a periodic payment of money to you, either for life or for a number of years)

☒ No

☐ Yes.....

24. **Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

☒ No

☐ Yes.....

Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):

25. **Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit**

☒ No

☐ Yes. Give specific information about them....  \_\_\_\_\_

26. **Patents, copyrights, trademarks, trade secrets, and other intellectual property**

*Examples:* Internet domain names, websites, proceeds from royalties and licensing agreements

☒ No

☐ Yes. Give specific information about them....  \_\_\_\_\_

27. **Licenses, franchises, and other general intangibles**

*Examples:* Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

☒ No

☐ Yes. Give specific information about them....  \_\_\_\_\_

<b>Money or property owed to you?</b>	<b>Current value of the portion you own?</b>
	Do not deduct secured claims or exemptions.

28. **Tax refunds owed to you**

☒ No

☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years.....

Federal: \_\_\_\_\_  
 State: \_\_\_\_\_  
 Local: \_\_\_\_\_

29. **Family support**

*Examples:* Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

Debtor 1  
Debtor 2

**Fernando**  
**Carlene**  
First Name

**Anatolio**  
**Rodrigues**  
Middle Name

**Soberanis**  
**Mascarenhas**  
Last Name

Case number (if known) **18-14240**

- ☒ No  
☐ Yes. Give specific information.....

Alimony: \_\_\_\_\_  
Maintenance: \_\_\_\_\_  
Support: \_\_\_\_\_  
Divorce settlement: \_\_\_\_\_  
Property settlement: \_\_\_\_\_

30. **Other amounts someone owes you**

*Examples:* Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

- ☒ No  
☐ Yes. Give specific information.....

\_\_\_\_\_

31. **Interests in insurance policies**

*Examples:* Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

- ☒ No  
☐ Yes. Name the insurance company  
of each policy and list its value....

Company name:

Beneficiary:

Surrender or refund value:

32. **Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

- ☒ No  
☐ Yes. Give specific information.....

\_\_\_\_\_

33. **Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment**

*Examples:* Accidents, employment disputes, insurance claims, or rights to sue

- ☒ No  
☐ Yes. Describe each claim.....

\_\_\_\_\_

34. **Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims**

- ☒ No  
☐ Yes. Describe each claim.....

\_\_\_\_\_

35. **Any financial assets you did not already list**

- ☒ No  
☐ Yes. Give specific information.....

\_\_\_\_\_

Debtor 1  
Debtor 2

**Fernando**  
**Carlene**  
First Name

**Anatolio**  
**Rodrigues**  
Middle Name

**Soberanis**  
**Mascarenhas**  
Last Name

Case number (if known) **18-14240**

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here..... →

**\$150,642.00**

**Part 5:** Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?

- ☒ No. Go to Part 6.  
☐ Yes. Go to line 38.

**Current value of the  
portion you own?**  
Do not deduct secured  
claims or exemptions.

38. Accounts receivable or commissions you already earned

- ☒ No  
☐ Yes. Describe.....

39. Office equipment, furnishings, and supplies

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

- ☒ No  
☐ Yes. Describe.....

40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade

- ☒ No  
☐ Yes. Describe.....

41. Inventory

- ☒ No  
☐ Yes. Describe.....

42. Interests in partnerships or joint ventures

- ☒ No  
☐ Yes. Describe.....

43. Customer lists, mailing lists, or other compilations

- ☒ No  
☐ Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?  
☒ No  
☐ Yes. Describe.....

44. Any business-related property you did not already list

- ☒ No  
☐ Yes. Give specific  
information.....

45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here..... →

**\$0.00**



**Part 6:**

Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.  
 If you own or have an interest in farmland, list it in Part 1.

46. **Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?**

☒ No. Go to Part 7.  
☐ Yes. Go to line 47.

**Current value of the portion you own?**  
 Do not deduct secured claims or exemptions.

47. **Farm animals**  
*Examples:* Livestock, poultry, farm-raised fish

☒ No  
☐ Yes.....

48. **Crops—either growing or harvested**

☒ No  
☐ Yes. Give specific information.....

49. **Farm and fishing equipment, implements, machinery, fixtures, and tools of trade**

☒ No  
☐ Yes.....

50. **Farm and fishing supplies, chemicals, and feed**

☒ No  
☐ Yes.....

51. **Any farm- and commercial fishing-related property you did not already list**

☒ No  
☐ Yes. Give specific information.....

52. **Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here.....→**

**\$0.00**

**Part 7:**

Describe All Property You Own or Have an Interest in That You Did Not List Above

53. **Do you have other property of any kind you did not already list?**

*Examples:* Season tickets, country club membership

☒ No  
☐ Yes. Give specific information.....

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

54. Add the dollar value of all of your entries from Part 7. Write that number here.....→

\$0.00

Part 8: List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2.....→

\$483,300.00

56. Part 2: Total vehicles, line 5

\$60,541.00

57. Part 3: Total personal and household items, line 15

\$8,350.00

58. Part 4: Total financial assets, line 36

\$150,642.00

59. Part 5: Total business-related property, line 45

\$0.00

60. Part 6: Total farm- and fishing-related property, line 52

\$0.00

61. Part 7: Total other property not listed, line 54

+ \$0.00

62. Total personal property. Add lines 56 through 61.....

\$219,533.00

Copy personal property total → + \$219,533.00

63. Total of all property on Schedule A/B. Add line 55 + line 62.....

\$702,833.00

Fill in this information to identify your case:

Debtor 1	<u>Fernando</u>	<u>Anatolio</u>	<u>Soberanis</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>Carlene</u>	<u>Rodrigues</u>	<u>Mascarenhas</u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Western District of Washington</u>		
Case number (if known)	<u>18-14240</u>		

☐ Check if this is an amended filing

## Official Form 106C

### Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

- ☒ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)  
☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
Brief description: Residence 19199 Rainier View Rd SE Monroe, WA 98272  Line from Schedule A/B: <u>1.1</u>	<u>\$483,300.00</u>	<input checked="" type="checkbox"/> <u>\$125,000.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>Wash. Rev. Code. § 6.13.030</u> _____ _____
Brief description: 2015 GMC Yukon  Line from Schedule A/B: <u>3.1</u>	<u>\$35,341.00</u>	<input checked="" type="checkbox"/> <u>\$1,224.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>Wash. Rev. Code. § 6.15.010(1)(c)(iii)</u> _____ _____

3. Are you claiming a homestead exemption of more than \$160,375?

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

- ☒ No  
☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?  
☐ No  
☐ Yes

Debtor 1  
Debtor 2

**Fernando  
Carlene**  
First Name

**Anatolio  
Rodrigues**  
Middle Name

**Soberanis  
Mascarenhas**  
Last Name

Case number (if known) 18-14240

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
Brief description: <u>2000 Ford Ranger</u>  Line from Schedule A/B: <u>3.4</u>	<u>\$1,800.00</u>	<input checked="" type="checkbox"/> <u>\$1,800.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Wash. Rev. Code. § 6.15.010(1)(c)(iii) _____ _____
Brief description: <u>Household Goods and Furnishings</u>  Line from Schedule A/B: <u>6</u>	<u>\$3,000.00</u>	<input checked="" type="checkbox"/> <u>\$3,000.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Wash. Rev. Code. § 6.15.010(1)(d)(i) _____ _____
Brief description: <u>Electronics, including TV, 3 audio systems, and 3 cell phones</u>  Line from Schedule A/B: <u>7</u>	<u>\$2,100.00</u>	<input checked="" type="checkbox"/> <u>\$2,100.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Wash. Rev. Code. § 6.15.010(1)(d)(i) _____ _____
Brief description: <u>Pictures and paints</u>  Line from Schedule A/B: <u>8</u>	<u>\$400.00</u>	<input checked="" type="checkbox"/> <u>\$400.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Wash. Rev. Code. § 6.15.010(1)(d)(i) _____ _____
Brief description: <u>Tools</u>  Line from Schedule A/B: <u>9</u>	<u>\$300.00</u>	<input checked="" type="checkbox"/> <u>\$300.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Wash. Rev. Code. § 6.15.010(1)(d)(i) _____ _____
Brief description: <u>Clothing and Wearing Apparel</u>  Line from Schedule A/B: <u>11</u>	<u>\$2,000.00</u>	<input checked="" type="checkbox"/> <u>\$2,000.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Wash. Rev. Code. § 6.15.010(1)(a) _____ _____
Brief description: <u>3 watches and costume jewelry</u>  Line from Schedule A/B: <u>12</u>	<u>\$550.00</u>	<input checked="" type="checkbox"/> <u>\$550.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Wash. Rev. Code. § 6.15.010(1)(a) _____ _____
Brief description: <u>Chase - Acct# 1676 Checking account</u>  Line from Schedule A/B: <u>17</u>	<u>\$642.00</u>	<input checked="" type="checkbox"/> <u>\$500.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Wash. Rev. Code. § 6.15.010(1) (d)(ii)(A) _____ _____
Brief description: <u>Retirement account</u>  Line from Schedule A/B: <u>21</u>	<u>\$150,000.00</u>	<input checked="" type="checkbox"/> <u>\$150,000.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(b)(3)(C) _____ _____

Fill in this information to identify your case:

Debtor 1	<u>Fernando</u>	<u>Anatolio</u>	<u>Soberanis</u>
	First Name	Middle Name	Last Name
Debtor 2	<u>Carlene</u>	<u>Rodrigues</u>	<u>Mascarenhas</u>
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>Western District of Washington</u>			
Case number (if known)	<u>18-14240</u>		

☐ Check if this is an amended filing

## Official Form 106D

### Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

**1. Do any creditors have claims secured by your property?**

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

**Part 1: List All Secured Claims**

**2. List all secured claims.** If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
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<b>2.1</b>	<u>Davis, Robin</u> Creditor's Name <u>c/o Reed Longyear Malnati Ahrens</u> <u>801 2nd Ave Ste 1415</u> Number Street <u>Seattle, WA 98104-1517</u> City State ZIP Code <b>Who owes the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt <b>Date debt was incurred</b> <u>12/31/2015</u>	<b>Describe the property that secures the claim:</b> <u>Residence</u> <u>19199 Rainier View Rd SE Monroe, WA 98272</u> <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Nature of lien.</b> Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input checked="" type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ <b>Last 4 digits of account number</b> _____	<u>\$135.00</u>	<u>\$483,300.00</u>	<u>\$0.00</u>
<b>Add the dollar value of your entries in Column A on this page. Write that number here:</b>			<u>\$135.00</u>		

Part 1: Additional Page		Column A	Column B	Column C
After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
<div>Remarks: Car Accident - 3/18/2014 Robin L Davis and Kyle Davis v Drew Jackson, et al, Case# 15-01874-2 - Snohomish County Superior Court - Judgment Entered</div>				
2.2	<div>Nationwide Northwest</div> <div>Creditor's Name</div> <div>3435 N Cicero Ave</div> <div>Number Street</div> <div>Chicago, IL 60641</div> <div>City State ZIP Code</div> <div>Who owes the debt? Check one.</div> <div><input type="checkbox"/> Debtor 1 only</div> <div><input type="checkbox"/> Debtor 2 only</div> <div><input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only</div> <div><input type="checkbox"/> At least one of the debtors and another</div> <div><input type="checkbox"/> Check if this claim relates to a community debt</div> <div>Date debt was incurred</div> <div>08/01/2017</div>	<div>Describe the property that secures the claim:</div> <div>2013 Honda Accord</div> <div>As of the date you file, the claim is: Check all that apply.</div> <div><input type="checkbox"/> Contingent</div> <div><input type="checkbox"/> Unliquidated</div> <div><input type="checkbox"/> Disputed</div> <div>Nature of lien. Check all that apply.</div> <div><input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)</div> <div><input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)</div> <div><input type="checkbox"/> Judgment lien from a lawsuit</div> <div><input type="checkbox"/> Other (including a right to offset)</div> <div>Last 4 digits of account number 1 9 2 7</div>	\$14,940.00	\$9,900.00
\$5,040.00				
Add the dollar value of your entries in Column A on this page. Write that number here:		\$14,940.00		

Part 1: Additional Page		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.3	<p>Regional Acceptance Co</p> <p>Creditor's Name</p> <p>Attn: Bankruptcy</p> <p>1424 E Firetower Rd</p> <p>Number Street</p> <p>Greenville, NC 27858</p> <p>City State ZIP Code</p> <p><b>Who owes the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim relates to a community debt</p> <p><b>Date debt was incurred</b></p> <p>01/01/2018</p>	<p><b>Describe the property that secures the claim:</b></p> <p>2018 Kia Optima</p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Nature of lien.</b> Check all that apply.</p> <p><input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)</p> <p><input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)</p> <p><input type="checkbox"/> Judgment lien from a lawsuit</p> <p><input type="checkbox"/> Other (including a right to offset)</p> <p><b>Last 4 digits of account number</b> 3 7 0 1</p>	\$34,121.00	\$13,500.00
		\$20,621.00		
Add the dollar value of your entries in Column A on this page. Write that number here:		\$34,121.00		

Part 1: Additional Page		Column A	Column B	Column C
After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.4	<p>Seterus, Inc.</p> <p>Creditor's Name</p> <p>Attn: Bankruptcy</p> <p>PO Box 1077</p> <p>Number Street</p> <p>Hartford, CT 06143-1077</p> <p>City State ZIP Code</p> <p><b>Who owes the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim relates to a community debt</p> <p><b>Date debt was incurred</b></p> <p>Jan 01, 2008</p> <p>\$0.00</p>	<p><b>Describe the property that secures the claim:</b></p> <p>Residence</p> <p>19199 Rainier View Rd SE Monroe, WA 98272</p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Nature of lien.</b> Check all that apply.</p> <p><input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)</p> <p><input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)</p> <p><input type="checkbox"/> Judgment lien from a lawsuit</p> <p><input type="checkbox"/> Other (including a right to offset)</p> <p><b>Last 4 digits of account number</b> 7 2 2 5</p>	\$374,441.00	\$483,300.00
<p><b>Add the dollar value of your entries in Column A on this page. Write that number here:</b></p>		\$374,441.00		



Part 1:	Additional Page	Column A	Column B	Column C
	After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any

2.5

Sinclair Homeowners Association

Creditor's Name

c/o Pody & McDonald, PLLC

1200 5th Ave Ste 1410

Number Street

Seattle, WA 98101-3106

City State ZIP Code

Who owes the debt? Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☒ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☒ Check if this claim relates to a community debt

Date debt was incurred

\$0.00

Describe the property that secures the claim:

Residence

19199 Rainier View Rd SE Monroe, WA 98272

As of the date you file, the claim is: Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Nature of lien. Check all that apply.

☒ An agreement you made (such as mortgage or secured car loan)

☒ Statutory lien (such as tax lien, mechanic's lien)

☐ Judgment lien from a lawsuit

☐ Other (including a right to offset)

Last 4 digits of account number

Amount of claim

\$1,450.00

Value of collateral that supports this claim

\$483,300.00

Unsecured portion

Add the dollar value of your entries in Column A on this page. Write that number here:

\$1,450.00

Part 1: Additional Page		Column A	Column B	Column C
After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.6	<div> <div>Travis Howard</div> <div>Creditor's Name</div> <div>West Coast Judgment Recovery</div> <div>Po Box 1884</div> <div>Number Street</div> <div>Everett, WA 98206-1884</div> <div>City State ZIP Code</div> <div>Who owes the debt? Check one.</div> <div> <input type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input checked="" type="checkbox"/> Check if this claim relates to a community debt               </div> <div>Date debt was incurred</div> <div>5/31/2013</div> </div> <div> <div>Describe the property that secures the claim:</div> <div>Residence</div> <div>19199 Rainier View Rd SE Monroe, WA 98272</div> <div>As of the date you file, the claim is: Check all that apply.</div> <div> <input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed               </div> <div>Nature of lien. Check all that apply.</div> <div> <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)  <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)  <input checked="" type="checkbox"/> Judgment lien from a lawsuit  <input type="checkbox"/> Other (including a right to offset)               </div> <div>Last 4 digits of account number</div> </div>	\$1,763.50	\$483,300.00	
		\$0.00		
<div>Remarks: Kevin Rosenfield v Fernando Soberanis, et al, Case# 135-00694, King County District Court</div>				
Add the dollar value of your entries in Column A on this page. Write that number here:		\$1,763.50		

[illegible]

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

1

Davis, Kyle

Name

c/o Reed Longyear Malnati & Ahrens, PLLC 1415

NumberStreet

Seattle, WA 98104

CityStateZIP Code

On which line in Part 1 did you enter the creditor? 1

Last 4 digits of account number

2

Kemper Services Group

Name

PO Box

NumberStreet

Dallas, TX 75266

CityStateZIP Code

On which line in Part 1 did you enter the creditor? 1

Last 4 digits of account number

Fill in this information to identify your case:

Debtor 1	<u>Fernando</u>	<u>Anatolio</u>	<u>Soberanis</u>
	First Name	Middle Name	Last Name
Debtor 2	<u>Carlene</u>	<u>Rodrigues</u>	<u>Mascarenhas</u>
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>Western District of Washington</u>			
Case number (if known)	<u>18-14240</u>		

☐ Check if this is an amended filing

## Official Form 106E/F

### Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Hold Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

- ☒ No. Go to Part 2.  
☐ Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.  
(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

Total claim	Priority amount	Nonpriority amount
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<div><div></div><div>Priority Creditor's Name</div><div>Number Street</div><div>City State ZIP Code</div></div>	<div>Last 4 digits of account number</div> <div>When was the debt incurred?</div> <div>As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</div> <div>Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or person injury while you were intoxicated <input type="checkbox"/> Other. Specify</div>
<div>Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</div> <div>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</div>	

Part 2:

 List All of Your NONPRIORITY Unsecured Claims

## 3. Do any creditors have nonpriority unsecured claims against you?

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.
- ☒ Yes.

## 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

<b>4.1</b>	<b>Alliance One</b> Nonpriority Creditor's Name <b>6565 Kimball Dr Ste 200</b> Number Street <b>Gig Harbor, WA 98335-1206</b> City State ZIP Code  <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <div style="border: 1px dashed black; padding: 2px;">                     Remarks: Parking Tickets King County Municipal Court - K00767766 Seattle Municia Court - 1700644969                 </div>	<b>Last 4 digits of account number</b> _____  <b>When was the debt incurred?</b> _____ <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____	<b>Total claim</b>  <b>\$266.25</b>
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<b>4.2</b>	<b>Apelles</b> Nonpriority Creditor's Name <b>3700 Corporate Dr Ste 240</b> Number Street <b>Columbus, OH 43231-5001</b> City State ZIP Code  <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Last 4 digits of account number</b> <u>4646</u>  <b>When was the debt incurred?</b> _____ <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____	<b>unknown</b>
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Part 2:

 Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.			Total claim
<b>4.3</b>	<div><b>Bellevue Healthcare</b></div> <div>Nonpriority Creditor's Name</div> <div><b>2015 152nd Ave Ne</b></div> <div>Number      Street</div> <div><b>Redmond, WA 98052-5521</b></div> <div>City                      State      ZIP Code</div> <div><b>Who incurred the debt?</b> Check one.</div> <div> <input type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input checked="" type="checkbox"/> <b>Check if this claim is for a community debt</b> </div> <div><b>Is the claim subject to offset?</b></div> <div> <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes </div>	<div><b>Last 4 digits of account number</b> _____</div> <div><b>When was the debt incurred?</b> _____</div> <div><b>As of the date you file, the claim is:</b> Check all that apply.</div> <div> <input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed </div> <div><b>Type of NONPRIORITY unsecured claim:</b></div> <div> <input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input type="checkbox"/> Other. Specify _____ </div>	<b>\$279.00</b>
<b>4.4</b>	<div><b>Capital One</b></div> <div>Nonpriority Creditor's Name</div> <div><b>Attn: Bankruptcy</b></div> <div><b>PO Box 30285</b></div> <div>Number      Street</div> <div><b>Salt Lake City, UT 84130-0285</b></div> <div>City                      State      ZIP Code</div> <div><b>Who incurred the debt?</b> Check one.</div> <div> <input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> <b>Check if this claim is for a community debt</b> </div> <div><b>Is the claim subject to offset?</b></div> <div> <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes </div>	<div><b>Last 4 digits of account number</b> <u>1987</u></div> <div><b>When was the debt incurred?</b> <u>11/01/2011</u></div> <div><b>As of the date you file, the claim is:</b> Check all that apply.</div> <div> <input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed </div> <div><b>Type of NONPRIORITY unsecured claim:</b></div> <div> <input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input type="checkbox"/> Other. Specify _____ </div>	<b>\$2,088.00</b>
<b>4.5</b>	<div><b>Coast to Coast Financial Solutions</b></div> <div>Nonpriority Creditor's Name</div> <div><b>Po Box 1883</b></div> <div>Number      Street</div> <div><b>Southgate, MI 48195-0883</b></div> <div>City                      State      ZIP Code</div> <div><b>Who incurred the debt?</b> Check one.</div> <div> <input type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input checked="" type="checkbox"/> <b>Check if this claim is for a community debt</b> </div> <div><b>Is the claim subject to offset?</b></div> <div> <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes </div>	<div><b>Last 4 digits of account number</b> _____</div> <div><b>When was the debt incurred?</b> _____</div> <div><b>As of the date you file, the claim is:</b> Check all that apply.</div> <div> <input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed </div> <div><b>Type of NONPRIORITY unsecured claim:</b></div> <div> <input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify _____ </div>	<b>\$97.87</b>

Part 2:
Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.			Total claim
4.6	<b>Credit Collection Services</b> Nonpriority Creditor's Name <b>725 Canton St</b> Number      Street <b>Norwood, MA 02062-2679</b> City                      State      ZIP Code  <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b>  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <b>0422</b>  <b>When was the debt incurred?</b> _____  <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____	<b>\$11.12</b>
4.7	<b>Credit Collection Services</b> Nonpriority Creditor's Name <b>725 Canton St</b> Number      Street <b>Norwood, MA 02062-2679</b> City                      State      ZIP Code  <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b>  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number _____  <b>When was the debt incurred?</b> _____  <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____	<b>\$19,700.00</b>
<div> Remarks: Allstate Insurance Company - from accident claim </div>			



Debtor 1  
Debtor 2

Fernando  
Carlene

Anatolio  
Rodrigues

Soberanis  
Mascarenhas

First Name

Middle Name

Last Name

Case number (if known) **18-14240**

**Part 2:** Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

4.8

**Credit One Bank**

Nonpriority Creditor's Name

**ATTN: Bankruptcy**

**PO Box 98873**

Number Street

**Las Vegas, NV 89193**

City State ZIP Code

**Who incurred the debt?** Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

Last 4 digits of account number **9351**

When was the debt incurred? **02/01/2018**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☐ Other. Specify

**\$857.00**

4.9

**Discover Financial**

Nonpriority Creditor's Name

**PO Box 3025**

Number Street

**New Albany, OH 43054-3025**

City State ZIP Code

**Who incurred the debt?** Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

Last 4 digits of account number **4628**

When was the debt incurred? **06/01/2008**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☐ Other. Specify

**\$945.00**

Debtor 1  
Debtor 2

**Fernando  
Carlene**

**Anatolio  
Rodrigues**

**Soberanis  
Mascarenhas**

First Name

Middle Name

Last Name

Case number (if known) **18-14240**

**Part 2:** Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

4.10

**Diversified Consultants, Inc.**

Nonpriority Creditor's Name

**Po Box 1391**

Number Street

**Southgate, MI 48195-0391**

City State ZIP Code

**Who incurred the debt?** Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☒ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

**Is the claim subject to offset?**

☒ No

☐ Yes

Remarks: Direct TV Ref# 63908739

Last 4 digits of account number **7202**

**When was the debt incurred?**

**As of the date you file, the claim is:** Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

**Type of NONPRIORITY unsecured claim:**

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☐ Other. Specify

**\$428.54**

4.11

**Dynamic Collectors**

Nonpriority Creditor's Name

**Chehalis**

Number Street

**Chehalis, WA 98532**

City State ZIP Code

**Who incurred the debt?** Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☒ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

**Is the claim subject to offset?**

☒ No

☐ Yes

Remarks: Providence Health & Services

Last 4 digits of account number

**When was the debt incurred?**

**As of the date you file, the claim is:** Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

**Type of NONPRIORITY unsecured claim:**

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☐ Other. Specify

**\$482.00**

Debtor 1  
Debtor 2

Fernando  
Carlene

Anatolio  
Rodrigues

Soberanis  
Mascarenhas

First Name

Middle Name

Last Name

Case number (if known) **18-14240**

**Part 2:** Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

4.12	<b>ERC/Enhanced Recovery Corp</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy</b> <b>8014 Bayberry Road</b> Number Street <b>Jacksonville, FL 32256</b> City State ZIP Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Last 4 digits of account number</b> <u>9891</u> <b>When was the debt incurred?</b> <u>02/01/2018</u> <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify	<b>\$122.00</b>
4.13	<b>Evergreen Emergency Services</b> Nonpriority Creditor's Name <b>Po Box 120153</b> Number Street <b>Grand Rapids, MI 49528-0103</b> City State ZIP Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Last 4 digits of account number</b> _____ <b>When was the debt incurred?</b> _____ <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify	<b>\$218.73</b>
4.14	<b>Evergreen Health Monroe</b> Nonpriority Creditor's Name <b>14701 179th Ave Se</b> Number Street <b>Monroe, WA 98272-1108</b> City State ZIP Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Last 4 digits of account number</b> <u>9033</u> <b>When was the debt incurred?</b> <u>05/18/2018</u> <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify	<b>\$2,302.97</b>

Debtor 1  
Debtor 2

**Fernando  
Carlene**

**Anatolio  
Rodrigues**

**Soberanis  
Mascarenhas**

First Name

Middle Name

Last Name

Case number (if known) **18-14240**

**Part 2:** Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

4.15	<b>First National Credit Card/Legacy</b> Nonpriority Creditor's Name <b>First National Credit Card</b> <b>PO Box 5097</b> Number Street <b>Sioux Falls, SD 51117-5097</b> City State ZIP Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Last 4 digits of account number</b> <u>4060</u> <b>When was the debt incurred?</b> <u>03/01/2018</u> <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify	<b>\$283.00</b>
4.16	<b>First Point</b> Nonpriority Creditor's Name <b>Po Box 26140</b> Number Street <b>Greensboro, NC 27402-6140</b> City State ZIP Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Last 4 digits of account number</b> _____ <b>When was the debt incurred?</b> _____ <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify	<b>\$179.68</b>
4.17	<b>Genesis Bc/celtic Bank</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy</b> <b>268 South State Street Ste 300</b> Number Street <b>Salt Lake City, UT 84111</b> City State ZIP Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Last 4 digits of account number</b> <u>7127</u> <b>When was the debt incurred?</b> <u>11/01/2017</u> <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify	<b>\$168.00</b>

Debtor 1  
Debtor 2

**Fernando  
Carlene**

**Anatolio  
Rodrigues**

**Soberanis  
Mascarenhas**

First Name

Middle Name

Last Name

Case number (if known) **18-14240**

**Part 2:** Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

4.18	<b>LTD Financial Services Limited Partnership</b> Nonpriority Creditor's Name <b>3200 Wilcrest Dr Ste 600</b> Number Street <b>Houston, TX 77042-6000</b> City State ZIP Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <b>4060</b> <b>When was the debt incurred?</b> <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify	<b>\$345.20</b>
4.19	<b>Merchants Credit Association</b> Nonpriority Creditor's Name <b>2245 152nd Ave Ne</b> Number Street <b>Redmond, WA 98052-5519</b> City State ZIP Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <b>2226</b> <b>When was the debt incurred?</b> <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify	<b>\$4,328.89</b>
4.20	<b>OneMain Financial</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy</b> <b>601 NW 2nd Street</b> Number Street <b>Evansville, IN 47708</b> City State ZIP Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <b>4563</b> <b>When was the debt incurred?</b> <b>12/01/2017</b> <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify	<b>\$5,423.00</b>

Part 2:

 Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.			Total claim
<b>4.21</b>	<div><b>PacLab</b></div> <div>Nonpriority Creditor's Name</div> <div><b>Po Box 2670</b></div> <div>Number      Street</div> <div><b>Spokane, WA 99220-2670</b></div> <div>City                      State      ZIP Code</div> <div style="margin-top: 10px;"> <b>Who incurred the debt?</b> Check one.               <div style="display: flex; flex-direction: column; gap: 5px;"> <div><input type="checkbox"/> Debtor 1 only</div> <div><input type="checkbox"/> Debtor 2 only</div> <div><input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only</div> <div><input type="checkbox"/> At least one of the debtors and another</div> <div><input checked="" type="checkbox"/> <b>Check if this claim is for a community debt</b></div> </div> <div style="margin-top: 10px;"> <b>Is the claim subject to offset?</b> <div style="display: flex; flex-direction: column; gap: 5px;"> <div><input checked="" type="checkbox"/> No</div> <div><input type="checkbox"/> Yes</div> </div> </div> </div>	<div><b>Last 4 digits of account number</b> _____</div> <div><b>When was the debt incurred?</b> _____</div> <div><b>As of the date you file, the claim is:</b> Check all that apply.               <div style="display: flex; flex-direction: column; gap: 5px;"> <div><input type="checkbox"/> Contingent</div> <div><input type="checkbox"/> Unliquidated</div> <div><input type="checkbox"/> Disputed</div> </div> </div> <div style="margin-top: 10px;"> <b>Type of NONPRIORITY unsecured claim:</b> <div style="display: flex; flex-direction: column; gap: 5px;"> <div><input type="checkbox"/> Student loans</div> <div><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</div> <div><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</div> <div><input checked="" type="checkbox"/> Other. Specify</div> </div> </div>	<b>\$27.83</b>
<b>4.22</b>	<div><b>Providence Health &amp; Services</b></div> <div>Nonpriority Creditor's Name</div> <div><b>Po Box 3177</b></div> <div>Number      Street</div> <div><b>Portland, OR 97208-3177</b></div> <div>City                      State      ZIP Code</div> <div style="margin-top: 10px;"> <b>Who incurred the debt?</b> Check one.               <div style="display: flex; flex-direction: column; gap: 5px;"> <div><input type="checkbox"/> Debtor 1 only</div> <div><input type="checkbox"/> Debtor 2 only</div> <div><input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only</div> <div><input type="checkbox"/> At least one of the debtors and another</div> <div><input checked="" type="checkbox"/> <b>Check if this claim is for a community debt</b></div> </div> <div style="margin-top: 10px;"> <b>Is the claim subject to offset?</b> <div style="display: flex; flex-direction: column; gap: 5px;"> <div><input checked="" type="checkbox"/> No</div> <div><input type="checkbox"/> Yes</div> </div> </div> </div>	<div><b>Last 4 digits of account number</b> _____</div> <div><b>When was the debt incurred?</b> _____</div> <div><b>As of the date you file, the claim is:</b> Check all that apply.               <div style="display: flex; flex-direction: column; gap: 5px;"> <div><input type="checkbox"/> Contingent</div> <div><input type="checkbox"/> Unliquidated</div> <div><input type="checkbox"/> Disputed</div> </div> </div> <div style="margin-top: 10px;"> <b>Type of NONPRIORITY unsecured claim:</b> <div style="display: flex; flex-direction: column; gap: 5px;"> <div><input type="checkbox"/> Student loans</div> <div><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</div> <div><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</div> <div><input type="checkbox"/> Other. Specify</div> </div> </div>	<b>\$45.55</b>
<b>4.23</b>	<div><b>Radia</b></div> <div>Nonpriority Creditor's Name</div> <div><b>Po Box 34473</b></div> <div>Number      Street</div> <div><b>Seattle, WA 98124-1473</b></div> <div>City                      State      ZIP Code</div> <div style="margin-top: 10px;"> <b>Who incurred the debt?</b> Check one.               <div style="display: flex; flex-direction: column; gap: 5px;"> <div><input type="checkbox"/> Debtor 1 only</div> <div><input type="checkbox"/> Debtor 2 only</div> <div><input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only</div> <div><input type="checkbox"/> At least one of the debtors and another</div> <div><input checked="" type="checkbox"/> <b>Check if this claim is for a community debt</b></div> </div> <div style="margin-top: 10px;"> <b>Is the claim subject to offset?</b> <div style="display: flex; flex-direction: column; gap: 5px;"> <div><input checked="" type="checkbox"/> No</div> <div><input type="checkbox"/> Yes</div> </div> </div> </div>	<div><b>Last 4 digits of account number</b> _____</div> <div><b>When was the debt incurred?</b> _____</div> <div><b>As of the date you file, the claim is:</b> Check all that apply.               <div style="display: flex; flex-direction: column; gap: 5px;"> <div><input type="checkbox"/> Contingent</div> <div><input type="checkbox"/> Unliquidated</div> <div><input type="checkbox"/> Disputed</div> </div> </div> <div style="margin-top: 10px;"> <b>Type of NONPRIORITY unsecured claim:</b> <div style="display: flex; flex-direction: column; gap: 5px;"> <div><input type="checkbox"/> Student loans</div> <div><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</div> <div><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</div> <div><input type="checkbox"/> Other. Specify</div> </div> </div>	<b>\$457.68</b>

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.		Total claim
4.24	<div><div>Renton Collections, Inc.</div><div>Nonpriority Creditor's Name</div><div>Po Box 272</div><div>Number Street</div><div>Renton, WA 98057-0272</div><div>City State ZIP Code</div><div>Who incurred the debt? Check one.</div><div><div><input type="checkbox"/> Debtor 1 only</div><div><input type="checkbox"/> Debtor 2 only</div><div><input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only</div><div><input type="checkbox"/> At least one of the debtors and another</div><div><input type="checkbox"/> Check if this claim is for a community debt</div></div><div>Is the claim subject to offset?</div><div><div><input checked="" type="checkbox"/> No</div><div><input type="checkbox"/> Yes</div></div></div> <div><div>Last 4 digits of account number</div><div>When was the debt incurred?</div><div>As of the date you file, the claim is: Check all that apply.</div><div><div><input type="checkbox"/> Contingent</div><div><input type="checkbox"/> Unliquidated</div><div><input type="checkbox"/> Disputed</div></div><div>Type of NONPRIORITY unsecured claim:</div><div><div><input type="checkbox"/> Student loans</div><div><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</div><div><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</div><div><input type="checkbox"/> Other. Specify</div></div></div>	\$136.32
4.25	<div><div>Renton Collections, Inc.</div><div>Nonpriority Creditor's Name</div><div>PO Box 272</div><div>Number Street</div><div>Renton, WA 98057-0272</div><div>City State ZIP Code</div><div>Who incurred the debt? Check one.</div><div><div><input type="checkbox"/> Debtor 1 only</div><div><input type="checkbox"/> Debtor 2 only</div><div><input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only</div><div><input type="checkbox"/> At least one of the debtors and another</div><div><input checked="" type="checkbox"/> Check if this claim is for a community debt</div></div><div>Is the claim subject to offset?</div><div><div><input checked="" type="checkbox"/> No</div><div><input type="checkbox"/> Yes</div></div></div> <div><div>Last 4 digits of account number 3663</div><div>When was the debt incurred?</div><div>As of the date you file, the claim is: Check all that apply.</div><div><div><input type="checkbox"/> Contingent</div><div><input type="checkbox"/> Unliquidated</div><div><input type="checkbox"/> Disputed</div></div><div>Type of NONPRIORITY unsecured claim:</div><div><div><input type="checkbox"/> Student loans</div><div><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</div><div><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</div><div><input type="checkbox"/> Other. Specify</div></div></div>	\$218.73
4.26	<div><div>Snohomish Public Utility District no. 1</div><div>Nonpriority Creditor's Name</div><div>2320 California St</div><div>Number Street</div><div>Everett, WA 98201-3750</div><div>City State ZIP Code</div><div>Who incurred the debt? Check one.</div><div><div><input type="checkbox"/> Debtor 1 only</div><div><input type="checkbox"/> Debtor 2 only</div><div><input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only</div><div><input type="checkbox"/> At least one of the debtors and another</div><div><input checked="" type="checkbox"/> Check if this claim is for a community debt</div></div><div>Is the claim subject to offset?</div><div><div><input checked="" type="checkbox"/> No</div><div><input type="checkbox"/> Yes</div></div></div> <div><div>Last 4 digits of account number 7521</div><div>When was the debt incurred?</div><div>As of the date you file, the claim is: Check all that apply.</div><div><div><input type="checkbox"/> Contingent</div><div><input type="checkbox"/> Unliquidated</div><div><input type="checkbox"/> Disputed</div></div><div>Type of NONPRIORITY unsecured claim:</div><div><div><input type="checkbox"/> Student loans</div><div><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</div><div><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</div><div><input type="checkbox"/> Other. Specify</div></div></div>	\$7,744.38

Debtor 1  
Debtor 2

Fernando  
Carlene

Anatolio  
Rodrigues

Soberanis  
Mascarenhas

First Name

Middle Name

Last Name

Case number (if known) **18-14240**

**Part 2:** Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

4.27

**Transworld Sys Inc/33**

Nonpriority Creditor's Name

**Attn: Compliance Dept**

**PO Box 15630**

Number Street

**Wilmington, DE 19850**

City State ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☒ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **6964**

When was the debt incurred? **03/01/2017**

As of the date you file, the claim is: Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☐ Other. Specify

**\$675.00**

4.28

**US Bank**

Nonpriority Creditor's Name

**PO Box 1800**

Number Street

**St Paul, MN 55101**

City State ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☒ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☒ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☐ Other. Specify

**\$1,600.00**

Remarks: Overdraft from Checking Acct 6593



Debtor 1  
Debtor 2

**Fernando**  
**Carlene**

**Anatolio**  
**Rodrigues**

**Soberanis**  
**Mascarenhas**

First Name

Middle Name

Last Name

Case number (if known) **18-14240**

**Part 2:** Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

4.29

**US Bank/RMS CC**

Nonpriority Creditor's Name

**Attn: Bankruptcy**

**PO Box 5229**

Number Street

**Cincinnati, OH 45201-5229**

City State ZIP Code

**Who incurred the debt?** Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☒ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another
- ☐ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No
- ☐ Yes

Last 4 digits of account number **2269**

When was the debt incurred? **12/01/2017**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts
- ☐ Other. Specify

**\$2,098.00**

Debtor 1  
Debtor 2

**Fernando  
Carlene**

**Anatolio  
Rodrigues**

**Soberanis  
Mascarenhas**

First Name

Middle Name

Last Name

Case number (if known) **18-14240**

**Part 3:** List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

**Merchants Credit Association**

Name

**2245 152nd Ave Ne**

Number Street

**Redmond, WA 98052-5519**

City

State

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.13 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Merchants Credit Association**

Name

**2245 152nd Ave Ne**

Number Street

**Redmond, WA 98052-5519**

City

State

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.13 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Coast to Coast Financial Solutions**

Name

**Division #197**

**Po Box 78829**

Number Street

**Phoenix, AZ 85062-8829**

City

State

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.5 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**Ditectv**

Name

**Po Box 105261**

Number Street

**Atlanta, GA 30348-5261**

City

State

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.10 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 7202

**Quest Diagnostics**

Name

**P.O.Box 740698**

Number Street

**Cincinnati, OH 45274-0698**

City

State

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.6 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

Name

Number Street

City

State

ZIP Code

One which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

Name

Number Street

City

State

ZIP Code

One which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

		Total claim
Total claims from Part 1	6a. Domestic support obligations	6a. \$0.00
	6b. Taxes and certain other debts you owe the government	6b. \$0.00
	6c. Claims for death or personal injury while you were intoxicated	6c. \$0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. + \$0.00
	6e. Total. Add lines 6a through 6d.	6e. \$0.00

		Total claim
Total claims from Part 2	6f. Student loans	6f. \$0.00
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. \$0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. \$0.00
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + \$51,529.74
	6j. Total. Add lines 6f through 6i.	6j. \$51,529.74

Fill in this information to identify your case:

Debtor 1	<u>Fernando</u>	<u>Anatolio</u>	<u>Soberanis</u>
	First Name	Middle Name	Last Name
Debtor 2	<u>Carlene</u>	<u>Rodrigues</u>	<u>Mascarenhas</u>
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Western District of Washington</u>		
Case number (if known)	<u>18-14240</u>		

☐ Check if this is an amended filing

## Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

- ☒ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- ☐ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom you have the contract or lease	State what the contract or lease is for
2.1	<div>Name</div> <div>Number Street</div> <div>City State ZIP Code</div>	
2.2	<div>Name</div> <div>Number Street</div> <div>City State ZIP Code</div>	
2.3	<div>Name</div> <div>Number Street</div> <div>City State ZIP Code</div>	
2.4	<div>Name</div> <div>Number Street</div> <div>City State ZIP Code</div>	
2.5	<div>Name</div> <div>Number Street</div> <div>City State ZIP Code</div>	

Fill in this information to identify your case:

Debtor 1	<u>Fernando</u>	<u>Anatolio</u>	<u>Soberanis</u>
	First Name	Middle Name	Last Name
Debtor 2	<u>Carlene</u>	<u>Rodrigues</u>	<u>Mascarenhas</u>
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:		<u>Western District of Washington</u>	
Case number (if known)	<u>18-14240</u>		

☐ Check if this is an amended filing

## Official Form 106H

### Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. **Do you have any codebtors?** (If you are filing a joint case, do not list either spouse as a codebtor.)

☒ No

☐ Yes

2. **Within the last 8 years, have you lived in a community property state or territory?** (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

☐ No. Go to line 3.

☒ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

☒ No

☐ Yes. In which community state or territory did you live? \_\_\_\_\_. Fill in the name and current address of that person.

Name

Number Street

City State ZIP Code

3. **In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.**

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.1

Name

Number Street

City State ZIP Code

☐ Schedule D, line \_\_\_\_\_

☐ Schedule E/F, line \_\_\_\_\_

☐ Schedule G, line \_\_\_\_\_

Fill in this information to identify your case:

Debtor 1	<u>Fernando</u>	<u>Anatolio</u>	<u>Soberanis</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>Carlene</u>	<u>Rodrigues</u>	<u>Mascarenhas</u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Western District of Washington</u>		
Case number (if known)	<u>18-14240</u>		

Check if this is:

☐ An amended filing

☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

## Official Form 106I

### Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Employment

##### 1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

##### Employment status

##### Occupation

##### Employer's name

##### Employer's address

##### How long employed there?

##### Debtor 1

☒ Employed ☐ Not Employed

Operations Manager

Cascadian Building Maintenance

1331 118th Ave SE 100

Number Street

Bellevue, WA 98005

City

State

Zip Code

##### Debtor 2 or non-filing spouse

☐ Employed ☒ Not Employed

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Number Street

\_\_\_\_\_

City

State

Zip Code

#### Part 2: Give Details About Monthly Income

**Estimate monthly income as of the date you file this form.** If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. <b>List monthly gross wages, salary, and commissions</b> (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be.	2. <u>\$10,984.35</u>	<u>\$0.00</u>
3. <b>Estimate and list monthly overtime pay.</b>	3. + <u>\$0.00</u>	+ <u>\$0.00</u>
4. <b>Calculate gross income.</b> Add line 2 + line 3.	4. <u>\$10,984.35</u>	<u>\$0.00</u>

		For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here.....→	4.	\$10,984.35	\$0.00
<b>5. List all payroll deductions:</b>			
5a. Tax, Medicare, and Social Security deductions	5a.	\$1,700.91	\$0.00
5b. Mandatory contributions for retirement plans	5b.	\$0.00	\$0.00
5c. Voluntary contributions for retirement plans	5c.	\$549.22	\$0.00
5d. Required repayments of retirement fund loans	5d.	\$665.68	\$0.00
5e. Insurance	5e.	\$253.08	\$0.00
5f. Domestic support obligations	5f.	\$0.00	\$0.00
5g. Union dues	5g.	\$0.00	\$0.00
5h. Other deductions. Specify: _____	5h.	+\$0.00	+\$0.00
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	\$3,168.89	\$0.00
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$7,815.46	\$0.00
<b>8. List all other income regularly received:</b>			
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$0.00	\$0.00
8b. Interest and dividends	8b.	\$0.00	\$0.00
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$0.00	\$0.00
8d. Unemployment compensation	8d.	\$0.00	\$0.00
8e. Social Security	8e.	\$0.00	\$0.00
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f.	\$0.00	\$0.00
8g. Pension or retirement income	8g.	\$0.00	\$0.00
8h. Other monthly income. Specify: _____	8h.	+\$0.00	+\$0.00
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$0.00	\$0.00
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse	10.	\$7,815.46	\$0.00
11. State all other regular contributions to the expenses that you list in <i>Schedule J</i> . Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i> . Specify: _____	11.	+	\$0.00
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Your Assets and Liabilities and Certain Statistical Information</i> , if it applies	12.		\$7,815.46
<b>Combined monthly income</b>			
13. Do you expect an increase or decrease within the year after you file this form? <input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes. Explain: _____			

Fill in this information to identify your case:

Debtor 1	<u>Fernando</u>	<u>Anatolio</u>	<u>Soberanis</u>
	First Name	Middle Name	Last Name
Debtor 2	<u>Carlene</u>	<u>Rodrigues</u>	<u>Mascarenhas</u>
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:		<u>Western District of Washington</u>	
Case number	<u>18-14240</u>		
(if known)			

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

## Official Form 106J

### Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Your Household

1. Is this a joint case?

☐ No. Go to line 2.

☒ Yes. Does Debtor 2 live in a separate household?

☒ No

☐ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*.

2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

☐ No

☒ Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

Child

21

☐ No. ☒ Yes.

Granddaughter

9 mos

☐ No. ☒ Yes.

☐ No  
☐ Yes  
☐ No  
☐ Yes  
☐ No  
☐ Yes

3. Do your expenses include expenses of people other than yourself and your dependents?

☒ No

☐ Yes

#### Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$2,215.00

If not included in line 4:

4a. Real estate taxes

4a. \$0.00

4b. Property, homeowner's, or renter's insurance

4b. \$0.00

4c. Home maintenance, repair, and upkeep expenses

4c. \$100.00

4d. Homeowner's association or condominium dues

4d. \$45.00



		Your expenses	
5.	<b>Additional mortgage payments for your residence</b> , such as home equity loans	5.	<u>\$37.00</u>
6.	<b>Utilities:</b>		
6a.	Electricity, heat, natural gas	6a.	<u>\$275.00</u>
6b.	Water, sewer, garbage collection	6b.	<u>\$234.00</u>
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	<u>\$200.00</u>
6d.	Other. Specify: <u>Cable</u>	6d.	<u>\$150.00</u>
7.	<b>Food and housekeeping supplies</b>	7.	<u>\$900.00</u>
8.	<b>Childcare and children's education costs</b>	8.	<u>\$0.00</u>
9.	<b>Clothing, laundry, and dry cleaning</b>	9.	<u>\$0.00</u>
10.	<b>Personal care products and services</b>	10.	<u>\$0.00</u>
11.	<b>Medical and dental expenses</b>	11.	<u>\$25.00</u>
12.	<b>Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.	12.	<u>\$500.00</u>
13.	<b>Entertainment, clubs, recreation, newspapers, magazines, and books</b>	13.	<u>\$200.00</u>
14.	<b>Charitable contributions and religious donations</b>	14.	<u>\$0.00</u>
15.	<b>Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a.	Life insurance	15a.	<u>\$0.00</u>
15b.	Health insurance	15b.	<u>\$0.00</u>
15c.	Vehicle insurance	15c.	<u>\$400.00</u>
15d.	Other insurance. Specify: _____	15d.	<u>\$0.00</u>
16.	<b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16.	<u>\$0.00</u>
17.	<b>Installment or lease payments:</b>		
17a.	Car payments for Vehicle 1	17a.	<u>                    </u>
17b.	Car payments for Vehicle 2	17b.	<u>                    </u>
17c.	Other. Specify: _____	17c.	<u>                    </u>
17d.	Other. Specify: _____	17d.	<u>                    </u>
18.	<b>Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).</b>	18.	<u>\$0.00</u>
19.	<b>Other payments you make to support others who do not live with you.</b> Specify: _____	19.	<u>\$0.00</u>
20.	<b>Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.</b>		
20a.	Mortgages on other property	20a.	<u>\$0.00</u>
20b.	Real estate taxes	20b.	<u>\$0.00</u>
20c.	Property, homeowner's, or renter's insurance	20c.	<u>\$0.00</u>
20d.	Maintenance, repair, and upkeep expenses	20d.	<u>\$0.00</u>
20e.	Homeowner's association or condominium dues	20e.	<u>\$0.00</u>

21. Other. Specify: \_\_\_\_\_

21. + \_\_\_\_\_ \$0.00

22. Calculate your monthly expenses.

- 22a. Add lines 4 through 21.
- 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2
- 22c. Add line 22a and 22b. The result is your monthly expenses.

22a. \_\_\_\_\_ \$5,281.00

22b. \_\_\_\_\_ \$0.00

22c. \_\_\_\_\_ \$5,281.00

23. Calculate your monthly net income.

- 23a. Copy line 12 (your combined monthly income) from *Schedule I*.
- 23b. Copy your monthly expenses from line 22c above.
- 23c. Subtract your monthly expenses from your monthly income.  
The result is your *monthly net income*.

23a. \_\_\_\_\_ \$7,760.10

23b. - \_\_\_\_\_ \$5,281.00

23c. \_\_\_\_\_ \$2,479.10

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

- ☒ No.
- ☐ Yes.

None

Fill in this information to identify your case:

Debtor 1	<u>Fernando</u>	<u>Anatolio</u>	<u>Soberanis</u>
	First Name	Middle Name	Last Name
Debtor 2	<u>Carlene</u>	<u>Rodrigues</u>	<u>Mascarenhas</u>
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Western District of Washington</u>		
Case number (if known)	<u>18-14240</u>		

☐ Check if this is an amended filing

## Official Form 106Sum

# Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

### Part 1: Summarize Your Assets

#### Your assets

Value of what you own

1. **Schedule A/B: Property** (Official Form 106A/B)

1a. Copy line 55, Total real estate, from <i>Schedule A/B</i> .....	<u>\$483,300.00</u>
1b. Copy line 62, Total personal property, from <i>Schedule A/B</i> .....	<u>\$219,533.00</u>
1c. Copy line 63, Total of all property on <i>Schedule A/B</i> .....	<u>\$702,833.00</u>

### Part 2: Summarize Your Liabilities

#### Your liabilities

Amount you owe

2. **Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 106D)

2a. Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i> .....	<u>\$460,967.50</u>
---	---------------------

3. **Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 106E/F)

3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i> .....	<u>\$0.00</u>
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i> .....	<u>\$51,529.74</u>

Your total liabilities

\$512,497.24

### Part 3: Summarize Your Income and Expenses

4. **Schedule I: Your Income** (Official Form 106I)

Copy your combined monthly income from line 12 of <i>Schedule I</i> .....	<u>\$7,760.10</u>
---	-------------------

5. **Schedule J: Your Expenses** (Official Form 106J)

Copy your monthly expenses from line 22c of <i>Schedule J</i> .....	<u>\$5,281.00</u>
---	-------------------

Part 4: Answer These Questions for Administrative and Statistical Records

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

- ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
- ☒ Yes

7. What kind of debt do you have?

- ☒ Your debts are primarily consumer debts. Consumer debts are those “incurred by an individual primarily for a personal, family, or household purpose.” 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- ☐ Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$6,216.73

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Total claim

From Part 4 on Schedule E/F, copy the following:

9a. Domestic support obligations (Copy line 6a.)	\$0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00
9d. Student loans. (Copy line 6f.)	\$0.00
9e.Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$0.00
9g. Total. Add lines 9a through 9f.	\$0.00

Fill in this information to identify your case:

Debtor 1	<u>Fernando</u>	<u>Anatolio</u>	<u>Soberanis</u>
	First Name	Middle Name	Last Name
Debtor 2	<u>Carlene</u>	<u>Rodrigues</u>	<u>Mascarenhas</u>
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Western District of Washington</u>		
Case number (if known)	<u>18-14240</u>		

☐ Check if this is an amended filing

## Official Form 106Dec

### Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

#### Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person \_\_\_\_\_ Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X

/s/ Fernando Anatolio Soberanis

Fernando Anatolio Soberanis, Debtor 1, Debtor 1

X

/s/ Carlene Rodrigues Mascarenhas

Carlene Rodrigues Mascarenhas, Debtor 2

Date 11/15/2018

MM/ DD/ YYYY

Date 11/15/2018

MM/ DD/ YYYY

Fill in this information to identify your case:

Debtor 1	<u>Fernando</u>	<u>Anatolio</u>	<u>Soberanis</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>Carlene</u>	<u>Rodrigues</u>	<u>Mascarenhas</u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Western District of Washington</u>		
Case number (if known)	<u>18-14240</u>		

☐ Check if this is an amended filing

## Official Form 107

# Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

### Part 1: Give Details About Your Marital Status and Where You Lived Before

#### 1. What is your current marital status?

- ☒ Married  
☐ Not married

#### 2. During the last 3 years, have you lived anywhere other than where you live now?

- ☒ No  
☐ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1:	Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there
<div><div><div>Number</div><div>Street</div></div><div>City</div><div>State</div><div>ZIP Code</div></div>	<div>From</div> <div>To</div>	<div><div><div>Number</div><div>Street</div></div><div>City</div><div>State</div><div>ZIP Code</div></div>	<div>From</div> <div>To</div>
<div><div><div>Number</div><div>Street</div></div><div>City</div><div>State</div><div>ZIP Code</div></div>	<div>From</div> <div>To</div>	<div><div><div>Number</div><div>Street</div></div><div>City</div><div>State</div><div>ZIP Code</div></div>	<div>From</div> <div>To</div>

**3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory?** (*Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.*)

- ☒ No
- ☐ Yes. Make sure you fill out *Schedule H: Your Codebtors* (Official Form 106H).

Part 2:

 Explain the Sources of Your Income

**4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?**

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.

If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

- ☐ No
- ☒ Yes. Fill in the details.

	Debtor 1	Debtor 2
	<b>Sources of income</b> <small>Check all that apply.</small>	<b>Sources of income</b> <small>Check all that apply.</small>
	<b>Gross Income</b> <small>(before deductions and exclusions)</small>	<b>Gross Income</b> <small>(before deductions and exclusions)</small>
<b>From January 1 of current year until the date you filed for bankruptcy:</b>	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <div style="text-align: right; margin-top: 10px;"><u>\$64,952.43</u></div> <input type="checkbox"/> Operating a business	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business
<b>For last calendar year:</b> <small>(January 1 to December 31, <u>2017</u>)</small> <div style="text-align: right;"><small>YYYY</small></div>	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <div style="text-align: right; margin-top: 10px;"><u>\$113,258.00</u></div> <input type="checkbox"/> Operating a business	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business
<b>For the calendar year before that:</b> <small>(January 1 to December 31, <u>2016</u>)</small> <div style="text-align: right;"><small>YYYY</small></div>	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <div style="text-align: right; margin-top: 10px;"><u>\$118,076.00</u></div> <input type="checkbox"/> Operating a business	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business

**5. Did you receive any other income during this year or the two previous calendar years?**

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

- ☒ No
- ☐ Yes. Fill in the details.

	Debtor 1	Debtor 2
	<b>Sources of income</b> <small>Describe below.</small>	<b>Sources of income</b> <small>Describe below.</small>
	<b>Gross income from each source</b> <small>(before deductions and exclusions)</small>	<b>Gross Income from each source</b> <small>(before deductions and exclusions)</small>
<b>From January 1 of current year until the date you filed for bankruptcy:</b>	<div style="border-bottom: 1px solid black; height: 20px; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; height: 20px; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; height: 20px;"></div>	<div style="border-bottom: 1px solid black; height: 20px; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; height: 20px; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; height: 20px;"></div>

**For last calendar year:**

(January 1 to December 31, 2017)

YYYY

**For the calendar year before that:**

(January 1 to December 31, 2016)

YYYY

Part 3:

List Certain Payments You Made Before You Filed for Bankruptcy

**6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?**

- ☐ **No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."  
 During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more?  
  
☐ No. Go to line 7.  
  
☐ Yes. List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.  
  
 \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

- ☒ **Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.**  
 During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?  
  
☐ No. Go to line 7.  
  
☒ Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

	Dates of payment	Total amount paid	Amount you still owe	Was this payment for...
<div>Seterus</div> <div>Creditor's Name</div> <div>PO Box 1077</div> <div>Number Street</div> <div>Hartford, CT 06143</div> <div>City State ZIP Code</div>	<div>10/01/2018</div> <div>09/01/2018</div> <div>09/01/2018</div>	<div>\$6,645.00</div>	<div>\$14,940.00</div>	<div><input checked="" type="checkbox"/> Mortgage</div> <div><input type="checkbox"/> Car</div> <div><input type="checkbox"/> Credit card</div> <div><input type="checkbox"/> Loan repayment</div> <div><input type="checkbox"/> Suppliers or vendors</div> <div><input type="checkbox"/> Other _____</div>
<div>Nationwide Northwest</div> <div>Creditor's Name</div> <div>3435 N Cicero Ave</div> <div>Number Street</div> <div>Chicago, IL 60641</div> <div>City State ZIP Code</div>	<div>10/01/2018</div> <div>09/01/2018</div> <div>08/01/2018</div>	<div>\$1,326.00</div>	<div>\$14,940.00</div>	<div><input type="checkbox"/> Mortgage</div> <div><input checked="" type="checkbox"/> Car</div> <div><input type="checkbox"/> Credit card</div> <div><input type="checkbox"/> Loan repayment</div> <div><input type="checkbox"/> Suppliers or vendors</div> <div><input type="checkbox"/> Other _____</div>



Last Name

Debtor 1	<b>Fernando Carlene</b>	<b>Anatolio Rodrigues</b>	<b>Soberanis Mascarenhas</b>	Case number (if known) <u>18-14240</u>
Debtor 2	First Name	Middle Name	Last Name	

  

Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Insider's Name _____  Number _____ Street _____  City _____ State _____ ZIP Code _____			

## Part 4: Identify Legal Actions, Repossessions, and Foreclosures

### 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

- ☐ No
- ☒ Yes. Fill in the details.

	Nature of the case	Court or agency	Status of the case
Case title <u>Fernando Anatolio Soberani</u>  Case number <u>K00767766</u>	Traffic Ticket	<u>Kirkland Municipal Court</u> Court Name <u>11740 Ne 118th St</u> Number Street <u>Kirkland, WA 98034-7114</u> City State ZIP Code	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
Case title <u>Fernando Anatolio Soberani</u>  Case number <u>1700644969</u>	Traffic Ticket	<u>Seattle Municipal Court</u> Court Name <u>Seattle Justice Center</u> <u>600 5th Ave</u> Number Street <u>Seattle, WA 98104-1900</u> City State ZIP Code	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
Case title <u>Kevin Rosenfield v Fernando Soberanis, et al</u>  Case number <u>135-00694, King County District Court</u>	Small Claims Judgment	<u>King County District Court Seattle</u> Court Name <u>516 3rd Ave E-327</u> Number Street <u>Seattle, WA 98104-2385</u> City State ZIP Code	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
Case title <u>Robin L Davis and Kyle Davis v Drew Jackson, et al,</u>  Case number <u>Case# 15-01874-2</u>		<u>Snohomish County Superior Court</u> Court Name <u>3000 Rockefeller Ave M/s 502</u> Number Street <u>Everett, WA 98201-4046</u> City State ZIP Code	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?

Check all that apply and fill in the details below.

- ☒ No. Go to line 11.
- ☐ Yes. Fill in the information below.

Creditor's Name

Number Street

City State ZIP Code

Describe the property

Date

Value of the property

Explain what happened

- ☐ Property was repossessed.
- ☐ Property was foreclosed.
- ☐ Property was garnished.
- ☐ Property was attached, seized, or levied.

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

- ☒ No
- ☐ Yes. Fill in the details.

Creditor's Name

Number Street

City State ZIP Code

Describe the action the creditor took

Date action was  
taken

Amount

Last 4 digits of account number: XXXX- \_ \_ \_ \_

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

- ☒ No
- ☐ Yes

Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

- ☒ No
- ☐ Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
<div style="border-bottom: 1px solid black; margin-bottom: 5px;">Person to Whom You Gave the Gift</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"></div> <div style="display: flex; justify-content: space-between; border-bottom: 1px solid black; margin-bottom: 5px;"> <span>Number</span> <span>Street</span> </div> <div style="display: flex; justify-content: space-between; border-bottom: 1px solid black; margin-bottom: 5px;"> <span>City</span> <span>State</span> <span>ZIP Code</span> </div> <div>Person's relationship to you _____</div>			

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

- ☒ No
- ☐ Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you contributed	Value
<div style="border-bottom: 1px solid black; margin-bottom: 5px;">Charity's Name</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"></div> <div style="display: flex; justify-content: space-between; border-bottom: 1px solid black; margin-bottom: 5px;"> <span>Number</span> <span>Street</span> </div> <div style="display: flex; justify-content: space-between; border-bottom: 1px solid black; margin-bottom: 5px;"> <span>City</span> <span>State</span> <span>ZIP Code</span> </div>			

Part 6:

List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

- ☒ No
- ☐ Yes. Fill in the details.

Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss	Date of your loss	Value of property lost
Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property</i> .			

**Part 7:** List Certain Payments or Transfers

**16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?**

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

- ☐ No
- ☒ Yes. Fill in the details.

	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Henry & DeGraaff, P.S.	Attorney's Fee		
Person Who Was Paid			
150 Nickerson St Ste 311		05/17/2018	\$1,690.00
Number Street			
Seattle, WA 98109-1634			
City State ZIP Code			
mainline@hdm-legal.com			
Email or website address			
Person Who Made the Payment, if Not You			

**17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?**

Do not include any payment or transfer that you listed on line 16.

- ☒ No
- ☐ Yes. Fill in the details.

	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid			
Number Street			
City State ZIP Code			

**18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?**

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

- ☒ No
- ☐ Yes. Fill in the details.

		Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
Person Who Received Transfer				
Number Street				
City	State ZIP Code			
Person's relationship to you _____				

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary?(These are often called *asset-protection devices*.)

- ☒ No
- ☐ Yes. Fill in the details.

	Description and value of the property transferred	Date transfer was made
Name of trust _____		
_____		

**Part 8:** List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

- ☐ No
- ☒ Yes. Fill in the details.

	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
US Bank	XXXX- 6 5 9 3	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	09/01/2018	(\$1,600.00)
Name of Financial Institution				
PO Box 1800				
Number Street				
Saint Paul, MN 55101				
City State ZIP Code				

Debtor 1	<b>Fernando</b>	<b>Anatolio</b>	<b>Soberanis</b>	
Debtor 2	<b>Carlene</b>	<b>Rodrigues</b>	<b>Mascarenhas</b>	
	First Name	Middle Name	Last Name	

Case number (if known) 18-14240

Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
<u>US Bank</u> Name of Financial Institution  <u>PO Box 1800</u> Number      Street   <u>Saint Paul, MN 55101</u> City                      State      ZIP Code	XXXX- <u>7</u> <u>8</u> <u>8</u> <u>4</u> <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	<u>October 2018</u>	<u>\$0.00</u>

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

- ☒ No
- ☐ Yes. Fill in the details.

Who else had access to it?	Describe the contents	Do you still have it?
Name of Financial Institution  Number      Street   City                      State      ZIP Code	Name  Number      Street   City                      State      ZIP Code	<input type="checkbox"/> No <input type="checkbox"/> Yes

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

- ☒ No
- ☐ Yes. Fill in the details.

Who else has or had access to it?	Describe the contents	Do you still have it?
Name of Storage Facility  Number      Street   City                      State      ZIP Code	Name  Number      Street   City                      State      ZIP Code	<input type="checkbox"/> No <input type="checkbox"/> Yes

Part 9:

 Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

- ☒ No
- ☐ Yes. Fill in the details.

Where is the property?	Describe the property	Value
<div style="border-bottom: 1px solid black; margin-bottom: 5px;">Owner's Name</div> <div style="display: flex; justify-content: space-between;"> <span>Number</span> <span>Street</span> </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"></div> <div style="display: flex; justify-content: space-between;"> <span>Number</span> <span>Street</span> </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"></div> <div style="display: flex; justify-content: space-between;"> <span>City</span> <span>State</span> <span>ZIP Code</span> </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"></div> <div style="display: flex; justify-content: space-between;"> <span>City</span> <span>State</span> <span>ZIP Code</span> </div>		

Part 10:

 Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- *Environmental law* means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- *Site* means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- *Hazardous material* means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

- ☒ No
- ☐ Yes. Fill in the details.

Governmental unit	Environmental law, if you know it	Date of notice
<div style="border-bottom: 1px solid black; margin-bottom: 5px;">Name of site</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Governmental unit</div> <div style="display: flex; justify-content: space-between;"> <span>Number</span> <span>Street</span> </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"></div> <div style="display: flex; justify-content: space-between;"> <span>Number</span> <span>Street</span> </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"></div> <div style="display: flex; justify-content: space-between;"> <span>City</span> <span>State</span> <span>ZIP Code</span> </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"></div> <div style="display: flex; justify-content: space-between;"> <span>City</span> <span>State</span> <span>ZIP Code</span> </div>		

25. Have you notified any governmental unit of any release of hazardous material?

- ☒ No
- ☐ Yes. Fill in the details.



Debtor 1	<b>Fernando</b>	<b>Anatolio</b>	<b>Soberanis</b>	
Debtor 2	<b>Carlene</b>	<b>Rodrigues</b>	<b>Mascarenhas</b>	
	First Name	Middle Name	Last Name	Case number (if known) 18-14240

  

		<b>Governmental unit</b>	<b>Environmental law, if you know it</b>	<b>Date of notice</b>
Name of site		Governmental unit		
Number	Street	Number	Street	
		City	State	ZIP Code
City	State	ZIP Code		

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No
- ☐ Yes. Fill in the details.

		<b>Court or agency</b>	<b>Nature of the case</b>	<b>Status of the case</b>
Case title		Court Name		<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
		Number	Street	
Case number		City	State	ZIP Code

**Part 11:** Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
- ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)
- ☐ A partner in a partnership
- ☐ An officer, director, or managing executive of a corporation
- ☐ An owner of at least 5% of the voting or equity securities of a corporation

☒ No. None of the above applies. Go to Part 12.

☐ Yes. Check all that apply above and fill in the details below for each business.

Name	<b>Describe the nature of the business</b>	<b>Employer Identification number</b> Do not include Social Security number or ITIN.
		EIN: _____
Number	Street	
<b>Name of accountant or bookkeeper</b>		<b>Dates business existed</b>
		From _____ To _____
City	State	ZIP Code

Debtor 1	<b>Fernando</b>	<b>Anatolio</b>	<b>Soberanis</b>	Case number (if known) <u>18-14240</u>
Debtor 2	<b>Carlene</b>	<b>Rodrigues</b>	<b>Mascarenhas</b>	
	First Name	Middle Name	Last Name	

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

☒ No

☐ Yes. Fill in the details below.

**Date issued**

\_\_\_\_\_  
Name MM / DD / YYYY

\_\_\_\_\_  
Number Street

\_\_\_\_\_

\_\_\_\_\_  
City State ZIP Code

**Part 12:** Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**X** \_\_\_\_\_ /s/ Fernando Anatolio Soberanis  
Signature of Fernando Anatolio Soberanis, Debtor 1

Date 11/15/2018

**X** \_\_\_\_\_ /s/ Carlene Rodrigues Mascarenhas  
Signature of Carlene Rodrigues Mascarenhas, Debtor 2

Date 11/15/2018

Did you attach additional pages to your *Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

☒ No

☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person \_\_\_\_\_

Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

# United States Bankruptcy Court Western District of Washington

**In re**

Soberanis, Fernando Anatolio

Case No. 18-14240

Mascarenhas, Carlene Rodrigues

Chapter 13**Debtor(s)****DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR**

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept .....	\$3,500.00
Prior to the filing of this statement I have received .....	\$1,000.00
Balance Due .....	\$2,500.00

2. The source of the compensation to be paid to me was:

☒ Debtor ☐ Other (specify)

3. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify)

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with another person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

11/15/2018*Date*/s/ Christina L. Henry*Signature of Attorney*Henry & DeGraaff, P.S.*Name of law firm*